



State of New Hampshire 2006 ANNUAL REPORT

The following information shall be given as of January 1
preceeding the due date Pursuant to RSA 304-C:80.

REPORT DUE BY April 1, 2006

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE
WILL BE ASSESSED A LATE FEE.

Filed

Date Filed: 03/15/2006

Business ID: 546043

William M. Gardner

Secretary of State

EIGHT NINER ZERO LLC

106 WEST PARISH RD
CONCORD, NH 03303

ADDRESS OF PRINCIPAL OFFICE:

106 WEST PARISH RD
CONCORD, NH 03303

REGISTERED AGENT AND OFFICE:

LOMBARD, GREGORY
106 WEST PARISH RD.
CONCORD, NH 03303

ENTITY TYPE: LLC

BUSINESS ID: 546043

STATE OF DOMICILE: NEW HAMPSHIRE

FEDERAL ID:

TO PROVIDE OPPORTUNITIES FOR PILOTS TO ADVANCE TO
NON-COMMERCIAL COMPLEX AIRCRAFT IN ECONOMICAL
ARRANGEMENT

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☐

The new mailing address

☐

The new principal office address

PO Box is acceptable.

MANAGERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

LIST AT LEAST ONE MANAGER BELOW OR MEMBER ON RIGHT

A

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

MEMBERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

MUST LIST AT LEAST ONE MEMBER BELOW IF NO MANAGERS

B

MEMB. GREGORY B. LOMBARD

STREET 106 WEST PARISH ROAD

CITY/STATE/ZIP CONCORD NH 03303

MEMB. JACK APPLEBEE

STREET 55 CRYSTAL AVENUE PMB 135

CITY/STATE/ZIP DERRY NH 03038-1725

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL MANAGERS/MEMBERS ARE ATTACHED

To be signed by the manager, if no manager, must be signed by a member.

I, the undersigned do hereby Certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

GREGORY B. LOMBARD

Please print name and title of signer:

GREGORY B. LOMBARD

/

MEMBER

NAME

TITLE

FEE DUE: \$100.00

E-MAIL ADDRESS (OPTIONAL):



WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, P.O. Box 9529, Manchester, NH 03108-9529